

UNITED STATES BANKRUPTCY COURT – DISTRICT OF ARIZONA		INVOLUNTARY PETITION	
In re (Name of Debtor - If individual: Last, First, Middle)		ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names)	
Last four digits of Soc. Sec. / Complete EIN or other Tax I.D. No. (if more than one, state all)			
Street Address of Debtor (No. & Street, City, and State)		Mailing Address of Debtor (if different from street address)	
County of Residence or Principal Place of Business:	ZIPCODE:		ZIPCODE:
Location of Principal Assets of Business Debtor (if different from previously listed addresses)			
Chapter of Bankruptcy Code under which Petition is Filed:		Chapter 7	Chapter 11
INFORMATION REGARDING DEBTOR (Check applicable boxes)			
<p style="text-align: center;">Nature of Debts (Check one box.)</p> <p>Petitioners believe:</p> <p style="padding-left: 20px;">Debts are primarily consumer debts</p> <p style="padding-left: 20px;">Debts are primarily business debts</p>	<p style="text-align: center;">Type of Debtor (Form of Organization)</p> <p>Individual (includes Joint Debtor)</p> <p>Corporation (includes LLC and LLP)</p> <p>Partnership</p> <p>Other (if debtor is not one of the above entities, check this box and state type of entity below.)</p> <hr style="width: 80%; margin-left: 0;"/>	<p style="text-align: center;">Nature of Business (Check one box.)</p> <p>Health Care Business</p> <p>Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B)</p> <p>Railroad</p> <p>Stockbroker</p> <p>Commodity Broker</p> <p>Clearing Bank</p> <p>Other</p>	
VENUE		FILING FEE (Check one box)	
<p>Debtor has been domiciled or has had a residence, principal place of business, or principal assets in the district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.</p> <p>A bankruptcy case concerning debtor's affiliate, general partner or partnership is pending in this district.</p>		<p>Full Filing Fee attached.</p> <p>Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached.</p> <p><i>[If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.]</i></p>	
PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional cases on attached sheets.)			
Name of Debtor	Case No.	Date	
Relationship	District	Judge	
<p style="text-align: center;">ALLEGATIONS (Check all applicable boxes)</p> <p>1. Petitioner(s) are eligible to file this petition pursuant to 11 U.S.C. § 303(b).</p> <p>2. The debtor is a person against whom an order for relief may be entered under title 11 of the United States Code.</p> <p>3.a. The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount;</p> <p style="text-align: center;">or</p> <p>b. Within 120 days preceding the filing of this petition, a custodian, other than a trustee, receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.</p>			THIS SPACE FOR COURT USE ONLY

Debtor:	Case No: (if known)
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TRANSFER OF CLAIM

Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

/s/ _____
Signature of Petitioner or Representative (State title)

/s/ _____ Date
Signature of Attorney

Name of Petitioner Date Signed

Name of Attorney or Firm (if any)

Name & Mailing
Address of Individual _____
Signing in Representative _____
Capacity _____

Address

Telephone No.

/s/ _____
Signature of Petitioner or Representative (State title)

/s/ _____ Date
Signature of Attorney

Name of Petitioner Date Signed

Name of Attorney or Firm (if any)

Name & Mailing
Address of Individual _____
Signing in Representative _____
Capacity _____

Address

Telephone No.

/s/ _____
Signature of Petitioner or Representative (State title)

/s/ _____ Date
Signature of Attorney

Name of Petitioner Date Signed

Name of Attorney or Firm (if any)

Name & Mailing
Address of Individual _____
Signing in Representative _____
Capacity _____

Address

Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner	Nature of Claim	Amount of Claim \$
Name and Address of Petitioner	Nature of Claim	Amount of Claim \$
Name and Address of Petitioner	Nature of Claim	Amount of Claim \$
Note: If there are more than three petitioners, attach additional sheets with the statement, under penalty of perjury, each petitioner's signature under the statement and the name of the attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims \$